

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

DEVOLDER-SANTOS FOR CONGRESS

ADDRESS (number and street)

47 FLINTLOCK DRIVE



Check if different than previously reported. (ACC)

SHIRLEY

NY

11967

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00721365

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

NY

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y
11 / 03 / 2020

in the State of

NY

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
10 / 01 / 2020

through

M M / D D / Y Y Y Y
10 / 14 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Marks, Nancy, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Marks, Nancy, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 22 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 28

Write or Type Committee Name

DEVOLDER-SANTOS FOR CONGRESS

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 1 | | 2 | 0 | 2 | 0 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 4 | | 2 | 0 | 2 | 0 |

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)).... | 33883.02 | 288733.76 |
| (b) Total Contribution Refunds (from Line 20(d)) | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 33883.02 | 288733.76 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 46499.44 | 216699.09 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 46499.44 | 216699.09 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 153284.67 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 81250.00 | |

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

DEVOLDER-SANTOS FOR CONGRESS

Report Covering the Period:

From:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 0 | 1 | | 2 | 0 | 2 | 0 |

To:

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 4 | | 2 | 0 | 2 | 0 |

I. RECEIPTS**COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

29190.42

240244.42

(ii) Unitemized.....

4692.60

47489.34

(iii) TOTAL of contributions from individuals ▶

33883.02

287733.76

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

0.00

1000.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

33883.02

288733.76

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

81250.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

81250.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

33883.02

369983.76

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 28

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 46499.44 | 216699.09 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate..... | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 0.00 | 0.00 |
| 21. OTHER DISBURSEMENTS | 0.00 | 0.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ► | 46499.44 | 216699.09 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 165901.09 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 33883.02 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 199784.11 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 46499.44 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 153284.67 |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A.

Anzai, Ruka, , ,

Mailing Address 13011 58 Ave Flushing NY 11355

City

Flushing

State

NY

Zip Code

11355

FEC ID number of contributing
federal political committee.

C

Name of Employer
Syscom USA

Occupation
Network Engineer

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 07 2020

Transaction ID : SA11AI.6596

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Bach, John, , ,

Mailing Address 44 Valley View Dr

City

Great Neck

State

NY

Zip Code

21021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Waitmore & Co

Occupation
General Counsel

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 08 2020

Transaction ID : SA11AI.6576

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Cali, Louis, , ,

Mailing Address 8 Woodbury Ct

City

Hicksville

State

NY

Zip Code

11801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2020

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11AI.6729

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Catsimatidis Jr, John, , ,

Mailing Address 817 5th Ave

City
New York

State
NY

Zip Code
10065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Evp

Occupation
Red Apple

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2020

Transaction ID : SA11AI.6801

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Cheema, Gurinder, , ,

Mailing Address 181 Kent St

City
Westbury

State
NY

Zip Code
11590

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Appraiser

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2020

Transaction ID : SA11AI.6701

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Chopra, Ravinder, , ,

Mailing Address 50 Jones St

City
New Hyde Park

State
NY

Zip Code
11040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stl Consultants

Occupation
Consultant

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11AI.6739

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Chopra, Ravinder, , ,

Mailing Address 50 Jones St

City

New Hyde Park

State

NY

Zip Code

11040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stl Consultants

Occupation
Consultant

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11AI.6741

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Collins III, Henry, , ,

Mailing Address P.O. Box 237

City

Verbank

State

NY

Zip Code

12585

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2020

Transaction ID : SA11AI.6856

Amount of Each Receipt this Period

1800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Collins III, Henry, , ,

Mailing Address P.O. Box 237

City

Verbank

State

NY

Zip Code

12585

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2020

Transaction ID : SA11AI.6857

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
| 12 | 13a | 13b | 14 | |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CONSTITUTIONAL RIGHTS PACMailing Address 1750 TYSONS BOULEVARD
SUITE 1500City
MCLEANState
VAZip Code
22102FEC ID number of contributing
federal political committee.**C** C00540229

Name of Employer

Occupation

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

Transaction ID : SA11AI.6585

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Fancelli, Gregory, , ,Mailing Address 2000 East Edgewood Dr
Suite 102City
LakelandState
FLZip Code
33803FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Retired

Retired

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 08 | | 2020 |

Transaction ID : SA11AI.6562

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Fancelli, Julia, , ,

Mailing Address 2000 Edgewood Dr

City
LakelandState
FLZip Code
33803FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Retired

Retired

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 07 | | 2020 |

Transaction ID : SA11AI.6586

Amount of Each Receipt this Period

2800.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

6100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

| | | | | | |
|---|-------------|-------------------------------------|--|--|--|
| A. Full Name (Last, First, Middle Initial) Kolomick, Deborah, , , | | | Date of Receipt M M / D D / Y Y Y Y Y 10 14 2020 | | |
| Mailing Address 44 Valley View Road | | | Transaction ID : SA11AI.6703 | | |
| City Great Neck | State NY | Zip Code 11021 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item | | | |
| Name of Employer Retired | | Occupation Retired | | | |
| Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | | | |
| B. Full Name (Last, First, Middle Initial) Lasersohn, Jack, , , | | | Date of Receipt M M / D D / Y Y Y Y Y 10 09 2020 | | |
| Mailing Address 30 Hither Ln | | | Transaction ID : SA11AI.6850 | | |
| City East Hampton | State NY | Zip Code 11937 | Amount of Each Receipt this Period 2800.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item | | | |
| Name of Employer The Vertical Group | | Occupation Venture Capitalist | | | |
| Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 2800.00 | | | |
| C. Full Name (Last, First, Middle Initial) Levy, Steve, , , | | | Date of Receipt M M / D D / Y Y Y Y Y 10 14 2020 | | |
| Mailing Address 950 South 2nd Street | | | Transaction ID : SA11AI.6744 | | |
| City Ronkonkoma | State NY | Zip Code 11779 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item | | | |
| Name of Employer Self Employed | | Occupation Self Employed | | | |
| Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 3400.00 | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Long, Katherine, , ,
Mailing Address 12 Homewood Lane

City State Zip Code
Dix Hills NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 07 2020

Transaction ID : SA11AI.6583

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Mann, Pritpal, , ,
Mailing Address 38 Rim Lane

City State Zip Code
Hicksville NY 11801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Real Estate Broker

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2020

Transaction ID : SA11AI.6705

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Miele, Samuel, , ,
Mailing Address 88 Britten Road

City State Zip Code
Green Village NJ 07935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Devolder-Santos For Congress

Occupation
Deputy Campaign Manager

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 13 2020

Transaction ID : SA11AI.6799

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Moustakis, Elias, , ,

Mailing Address 2119 40th Ave

City

Long Island City

State

NY

Zip Code

11101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Project Manager

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11AI.6699

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Murdolo, Sylvia, , ,

Mailing Address 25 Apex Drive

City

Coram

State

NY

Zip Code

11727

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sc Fres-Oem

Occupation

Planning Aide

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2020

Transaction ID : SA11AI.6821

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Musacchia, Danielle, , ,

Mailing Address 1384 Carlls Straight Path

City

Dix Hills

State

NY

Zip Code

11745

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 11 2020

Transaction ID : SA11AI.6594

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

625.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

| | | | | | |
|---|-------------|-------------------------------------|--|--|--|
| A. Full Name (Last, First, Middle Initial) Pipia, Vincent, , , | | | Date of Receipt M M / D D / Y Y Y Y Y 10 14 2020 | | |
| Mailing Address 87 Wildwood Drive | | | Transaction ID : SA11AI.6746 | | |
| City Dix Hills | State NY | Zip Code 11746 | Amount of Each Receipt this Period 500.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item | | | |
| Name of Employer IV Medical Services | | Occupation President | | | |
| Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 5300.00 | | | |
| B. Full Name (Last, First, Middle Initial) Pironi, Angela, , , | | | Date of Receipt M M / D D / Y Y Y Y Y 10 14 2020 | | |
| Mailing Address 219 Brookville Rd | | | Transaction ID : SA11AI.6737 | | |
| City Glen Head | State NY | Zip Code 11545 | Amount of Each Receipt this Period 300.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item | | | |
| Name of Employer Self Employed | | Occupation Self Employed | | | |
| Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | | | |
| C. Full Name (Last, First, Middle Initial) Qwuin, Zhiming, , , | | | Date of Receipt M M / D D / Y Y Y Y Y 10 14 2020 | | |
| Mailing Address 261 5th Avenue, Rm 401 | | | Transaction ID : SA11AI.6709 | | |
| City New York | State NY | Zip Code 10016 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Memo Item | | | |
| Name of Employer Self Employed | | Occupation Self Employed | | | |
| Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | | | |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 1800.00 | | |
| TOTAL This Period (last page this line number only)..... ▶ | | | | | |

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Reisinger, Vernon, , ,

Mailing Address 101 Snyder Avenue

| | | |
|----------------------|-------------|-------------------|
| City West Chester | State PA | Zip Code 19380 |
|----------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer Retired | Occupation Retired |
|-----------------------------|-----------------------|

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2020

Transaction ID : SA11AI.6751

Amount of Each Receipt this Period

275.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Ripak, Lawrence, , ,

Mailing Address 5 Tammi Ct

| | | |
|--------------------|-------------|-------------------|
| City Kings Park | State NY | Zip Code 11754 |
|--------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer Retired | Occupation Retired |
|-----------------------------|-----------------------|

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 314.42

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 10 2020

Transaction ID : SA11AI.6716

Amount of Each Receipt this Period

239.42

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Rogers, Mary, , ,

Mailing Address 27 Windsor Dr

| | | |
|------------------|-------------|-------------------|
| City Rockwall | State TX | Zip Code 75032 |
|------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|-----------------------------|-----------------------|
| Name of Employer Retired | Occupation Retired |
|-----------------------------|-----------------------|

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 13 2020

Transaction ID : SA11AI.6891

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

764.42

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 14 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Towbin, Steven, , ,

Mailing Address 140 Morris Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fix

Occupation

Attorney

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2020

Transaction ID : SA11AI.6889

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Triola, Doreen, , ,

Mailing Address 11 Geiger Pl

City

Huntington Station

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Best Efforts

Occupation

Best Efforts

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 08 2020

Transaction ID : SA11AI.6573

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Watson, Brian, , ,

Mailing Address 1999 Broadway

City

Denver

State

CO

Zip Code

80202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northstar Commercial Partners

Occupation

CEO

Receipt For: 2020

☐ Primary
☐ Other (specify) ▼

☒ General

Election Cycle-to-Date ▼

3050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 09 2020

Transaction ID : SA11AI.6905

Amount of Each Receipt this Period

2800.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

3300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Zhang, Junfang, , ,
Mailing Address 347 Nassau Avenue

City State Zip Code
Manhasset NY 11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Self Employed

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11AI.6707

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Zhou, Guohua, , ,
Mailing Address 124 Quaker Ridge Road

City State Zip Code
Manhasset NY 11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Manager

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 05 2020

Transaction ID : SA11AI.6805

Amount of Each Receipt this Period

101.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Zhou, Guohua, , ,
Mailing Address 124 Quaker Ridge Road

City State Zip Code
Manhasset NY 11030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Manager

Receipt For: 2020
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 14 2020

Transaction ID : SA11AI.6742

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1301.00

29190.42

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 28

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. A21 Global Freedom Summit

Mailing Address 2781 W MacArthur Blvd, Ste B605

City
Santa AnaState
CAZip Code
92704Purpose of Disbursement
Donation

012

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 14 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.6761

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Arena LLC

Mailing Address 1260 Stringham Ave

City
Salt Lake CityState
UTZip Code
84106Purpose of Disbursement
Digital

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

2839.98

Transaction ID : SB17.6679

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Brar, Harminder, , ,

Mailing Address 132 Bayberry Lane

City
LevittownState
NYZip Code
11756Purpose of Disbursement
Campaign Manager

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

7000.00

Transaction ID : SB17.6662

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

10339.98

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 28

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Brar, Harminder, , ,

Mailing Address 132 Bayberry Lane

City
LevittownState
NYZip Code
11756Purpose of Disbursement
Campaign Manager

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

1214.50

Transaction ID : SB17.6672

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Brar, Harminder, , ,

Mailing Address 132 Bayberry Lane

City
LevittownState
NYZip Code
11756Purpose of Disbursement
Campaign Manager

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 02 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17.6669

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Campaigns Unlimited

Mailing Address 47 Flintlock Drive

City
ShirleyState
NYZip Code
11967Purpose of Disbursement
Accounting

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 09 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.6674

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3229.50

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Deep Root Analytics LLC

Mailing Address 1600 Wilson Blvd, Ste 330

City
ArlingtonState
VAZip Code
22209Purpose of Disbursement
Campaign Consultant

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.6671

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Douma, Kara, , ,

Mailing Address 5407 Lampen Dr

City
East LansingState
MIZip Code
48823Purpose of Disbursement
Campaign Research

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 05 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

5800.00

Transaction ID : SB17.6668

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Epic Pay

Mailing Address 9300 Wade Blvd, Ste 200

City
FriscoState
TXZip Code
75035Purpose of Disbursement
Credit Card Fees

003

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 02 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

121.68

Transaction ID : SB17.6789

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

15921.68

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Gast, Liam, , ,

Mailing Address 5 Milller Ave

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 14 | | 2020 |

City
East MorichesState
NYZip Code
11788

FEC Identification Number

C C00721365Purpose of Disbursement
Campaign Video

004

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.6676

☐ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Full Name (Last, First, Middle Initial)

B. GMG Printing

Mailing Address PO Box 677

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

City
ShirleyState
NYZip Code
11967

FEC Identification Number

C C00721365Purpose of Disbursement
Lawn Signs

004

Amount of Each Disbursement this Period

10125.00

Transaction ID : SB17.6673

☐ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Full Name (Last, First, Middle Initial)

c. GMG Printing

Mailing Address PO Box 677

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 09 | | 2020 |

City
ShirleyState
NYZip Code
11967

FEC Identification Number

C C00721365Purpose of Disbursement
Signs

004

Amount of Each Disbursement this Period

825.55

Transaction ID : SB17.6675

☐ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

SUBTOTAL of Disbursements This Page (optional).....▶

11300.55

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 28

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marks, Nancy, , ,

Mailing Address 47 Flintlock Drive

City
ShirleyState
NYZip Code
11967Purpose of Disbursement
Reimbursement

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.6665

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hornack, Robert, , ,

Mailing Address 815 Cobblestone Boulevard

City
FredericksbergState
VAZip Code
22401Purpose of Disbursement
Financial Director

001

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.6665.0

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. Marks, Nancy, , ,

Mailing Address 47 Flintlock Drive

City
ShirleyState
NYZip Code
11967Purpose of Disbursement
Fundraiser Expense

003

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 14 | | 2020 |

FEC Identification Number

C C00721365

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.6696

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2650.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 28

| | | | |
|--|-----------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| 20a | 20b | 20c | 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Il Bacco Restaurante

Mailing Address 253-24 Northern Blvd

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 14 | 2020 |

City
Little NeckState
NYZip Code
11362

FEC Identification Number

C C00721365Purpose of Disbursement
Fundraiser Expenses

003

Amount of Each Disbursement this Period

1650.00

Transaction ID : SB17.6696.0

☒ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Full Name (Last, First, Middle Initial)

B. Nova List

Mailing Address 20130 Lakeview Ctr Plaza Ste 300

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 01 | 2020 |

City
AshburnState
VAZip Code
20147

FEC Identification Number

C C00721365Purpose of Disbursement
Mailing List Rental

003

Amount of Each Disbursement this Period

1029.28

Transaction ID : SB17.6793

☐ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Full Name (Last, First, Middle Initial)

C. Right View Strategies

Mailing Address 931 Nemeth Street

Date of Disbursement

| | | |
|-----|-----|---------|
| M M | D D | Y Y Y Y |
| 10 | 06 | 2020 |

City
BohemiaState
NYZip Code
11716

FEC Identification Number

C C00721365Purpose of Disbursement
Texting Program

004

Amount of Each Disbursement this Period

1543.95

Transaction ID : SB17.6660

☐ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

SUBTOTAL of Disbursements This Page (optional).....▶

2573.23

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 28

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <input type="checkbox"/> 20a | <input type="checkbox"/> 20b | <input type="checkbox"/> 20c | <input type="checkbox"/> 21 |

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NAME OF COMMITTEE (In Full)

DEVOLDER-SANTOS FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sunrise Data Services

Mailing Address 20130 Lakeview Ctr Plaza Ste 300

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10 | | 01 | | 2020 |

City
AshburnState
VAZip Code
20147

FEC Identification Number

C C00721365

Purpose of Disbursement
Mail List Processing

003

Amount of Each Disbursement this Period

340.00

Transaction ID : SB17.6795

☐ Memo Item

Candidate Name

DEVOLDER-SANTOS FOR CONGRESSCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY

District: 03

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| | | | | |

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

340.00

TOTAL This Period (last page this line number only).....▶

46354.94

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 28

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4149

DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Devolder Santos, George, Anthony, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
9002 Queens Blvd

City

Elmhurst

State

NY

ZIP Code

11373

☒ Personal Funds of the Candidate

Original Amount of Loan

5300.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5300.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 12^MD 31^D

Y 2019 Y

M M

D D

Y 0 Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

5300.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 24 OF 28

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4305

DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Devolder Santos, George, Anthony, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
9002 Queens Blvd

City

Elmhurst

State

NY

ZIP Code

11373

☐ Personal Funds of the Candidate

Original Amount of Loan

18550.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

18550.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 03 D

Y 2020 Y

M M

D D

Y 0 Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

18550.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 25 OF 28

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4207

DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Devolder Santos, George, Anthony, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
9002 Queens Blvd

City

Elmhurst

State

NY

ZIP Code

11373

☐ Personal Funds of the Candidate

Original Amount of Loan

4200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 01 M

D 10 D

Y 2020 Y

M M

D D

Y 0 Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

4200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 26 OF 28

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4276

DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Devolder Santos, George, Anthony, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
9002 Queens Blvd

City

Elmhurst

State

NY

ZIP Code

11373

☐ Personal Funds of the Candidate

Original Amount of Loan

2000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M /

D 10 D /

Y 2020 Y

M M /

D D /

Y 0 Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

2000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 27 OF 28

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4309

DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Devolder Santos, George, Anthony, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
9002 Queens Blvd

City

Elmhurst

State

NY

ZIP Code

11373

☒ Personal Funds of the Candidate

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 03 M

D 31 D

Y 2020 Y

M M

D D

Y 0 Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

50000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 28 OF 28

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4495

DEVOLDER-SANTOS FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Devolder Santos, George, Anthony, ,

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼Mailing Address
9002 Queens Blvd

City

Elmhurst

State

NY

ZIP Code

11373

☒ Personal Funds of the Candidate

Original Amount of Loan

1200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M 06 M

D 25 D

Y 2020 Y

M M

D D

Y 0 Y Y

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1200.00

TOTALS This Period (last page in this line only).....▶

81250.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.